Name of School:	Name of LEA:
State Tutoring Checklist	
This checklist is required to be filled out by each tutor. In Tutoring inbox at statetutor@azed.gov prior to the start item stating you understand the action item and when the questions on any part of the tutoring program, please cont	of tutoring. Please initial/check off each action action item is to be performed. If you have any
☐ COMPLETE a Certificate of Supplemental Instructitutoring.	on (CSI) for each student prior to the start of
\square Register students and enter sessions as students are ass	igned to you.
☐ Log your hours into the State Tutoring application local wait until the end of the tutoring session to enter hours. same time the system can be overwhelmed, thus forcing a	(If too many users are utilizing the system at the
\square Sign in sheet(s) must be complete and match hours and	l sessions entered into ADEConnect.
\Box Obtain a login and password for ADEConnect from y issues login and passwords).	your LEA Entity Administrator (ADE no longer
I,, understand that these ta and/or in a timely fashion. The last day of tutoring will be sessions will be 05/13/2016. ADEConnect will do a for ADE State Tutoring staff will NOT be creating a second state.	reced shut down on this exact day (5/13/16) and



Date: _____

Tutor Signature: _____